

Retail Food Inspection Report


Floyd County Health Department
Telephone (812) 948-4726

Establishment Name WAFFLE HOUSE #349	Telephone Number Est 812-944-3141 Own 770-729-5742	Date of Inspection 11/24/2020	ID#
Address 325 WEST SPRING STREET, NEW ALBANY IN 47150			
Owner MIDWEST WAFFLES	Purpose <input checked="" type="checkbox"/> Routine <input type="checkbox"/> Follow-up <input type="checkbox"/> Complaint <input type="checkbox"/> Pre-Operational <input type="checkbox"/> Temporary <input type="checkbox"/> HACCP <input type="checkbox"/> Other (list)	Follow Up	Released 11/24/2020
Owner's Address P.O. BOX 6450 NORCROSS, GA 30091-		Menu Type 1 _ 2 _ 3 <u>X</u> 4 _ 5 _	
Person in Charge MICHAEL GIRTON			
Responsible Person's Email PORCHIATOBIA@WAFFLEHOUSE.COM			
Certified Food Handler PORCHIA TOBIAS-HOHL			

CRITICAL ITEMS ARE IDENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS MARKED "C"
VIOLATION(S) REPEATED FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SUMMARY OF VIOLATIONS" AND IN THE NARRATIVE COLUMN MARKED AS "R"

Section #	C	NC	R	Narrative	To Be Corrected
118	X			Observed establishment unable to provide a copy of certified food protection manager certificate.	TODAY
245		X		Observed sanitizing rags outside of sanitizing bucket/allowed to dry.	TODAY
304		X		Observed plastic cups being wet stacked/not allowed to air dry.	TODAY
310		X		Observed ceiling vent in storage room to be dusty.	TODAY
422		X		Observed purse and hoodie stored on soda boxes and connections.	TODAY

Summary of Violations C 1 NC 4 R 0

Received by (name and title printed): MICHAEL GIRTON	Inspected by (name and title printed): A.J. Ingram CHIEF FOOD SPECIALIST
Received by (signature):	Inspected by (signature): 
cc:	cc: